U.S. P or the Paperwork Reduction Act of 1995, no persons are required to respond to a colli	stent and Trademark Office: U.S. D	igh 10/31/2002 OMB 0651-0031 EPARTMENT OF COMMERCE lys a valid OMB control number	
REQUEST	Application Number	09/914,901 09/04/2001 KLEINDIECK, S.	
FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL Address to: Commissioner for Patents Box RCE Washington, DC 20231	Filing Date		
	First Named Inventor		
	Art Unit	2834	
	Examiner Name	BUDD, M.	
	Attorney Docket Number	r 1750	

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

a. X Previously s	submitted e amendment(s)/reply under 37	7 CFR §1.116 p	reviously filed on	MA	RCH 21, 2003	JUN 2	3 2003
(Any unente	ared amendment(s) referred to	to above will be entered).			TEC	HNOLOGY	CENTER
ii. □ Consider iii. □ Other	the arguments in the A	ppeal Brief	or Reply Briet ( ————————————————————————————————————	orevioi -	usiy tiled on		
b. X Enclosed							
i. 🔲 Amen	dment/Reply ii	ii. 🗀 🛮 Info	ormation Disclo	sure S	Statement (IDS)	)	}
ii. 🔲 Affida	vit(s)/Declaration(s) i	v. 🗷 Otl	ner <u>PETITI</u>	ON FO	R EXTENSION	OF TIME	l
Miscellaneous	]						
a.   Suspension	of action on the above-	identified a	pplication is red	queste	d under 37 CFF	R §1.103(c)	for
a period of		nsion shall not	exceed 3 months; f	ee unde	er 37 CFR§1.17(I) re	quired)	i
b. D Other							
Fees The RCE	fee under 37 CFR §1.17(e) is	required by 37	CFR §1.114 when	the RCI	Ei⇔filed.		ì
a. 🗵 The Directo	r is hereby authorized to	o charge the	fallowing fees	, or cr	edit any overpa	yments, to	
Deposit Ac	Sount No. 10-4675						Ì
i. 🔯 RCE	fee required under 37 C	FR §1.17(e)	7 4 5/5	<u> </u>			
ii. 🖾 Exten	sion of time fee (37 CFR	§§1.136 and 1.	.17) # 4 [	25			
iii. 🔲 Other				_			
b. [] Check in th	e amount of \$	encl	os <b>ed</b>				
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c.   Payment by	credit card (Form PTO-20	38 enclosed)		1:4 -ar	information ch	ABID DAT	
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form about